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IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

PER DEPUTY CLE

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Civil Case No.

Name of Plaintiff(s)

Audit

Judge

(Number and Judge to be assigned by court)

APPLICATION TO PROCEED IN FORMA PAUPERIS

PLEASE READ CAREFULLY AND FULLY COMPLETE EACH SECTION.

Name of Defendant(s)

- I am willing to pursue my claims in this action under the new provisions of The Prison Litigation Reform Act, understanding that pursuing my claim requires payment of a partial filing fee and deduction of sums from my prison account when funds exist until the filing fee of \$150.00 has been paid in full.
- I have enclosed an executed Authorization form which authorizes the Institution holding me in custody to transmit to the Clerk a certified copy of my trust account for the past six (6) months as well as payments from the account in the amounts specified by 28 U.S.C. §1915(b).
- - (a) If the answer is "yes," are you now seeking relief because you are under imminent danger of serious physical injury?

 Yes _____ No _____

	serious physical injury:
	the Prison staff are trying to freighter me esti
	innates that may beat me up So they can put me in
4.	(a) Are you presently employed at the Institution? Yes $\sqrt{}$ No
	(b) If yes, what is your monthly compensation? \$ 2.00
5.	Do you own any cash or other property; have a bank account; or receive money from any source? Yes No
	If the answer is "yes" to any of the above, describe each source and the amount involved.
	No Bank noney family house worth about \$2000
	a vacate lot trusty of a house worth about \$ 1200
	Ill have lian on their and owe Book taxes
	de Chave been in prison for 8 yrs

(b) Please explain in detail why you are under imminent danger of

This certification is executed pursuant to Title 28, United States Code, Section 1746.

I certify under penalty of perjury that the foregoing is true and correct.

AUTHORIZATION

(Prisoner's Account Only)

Case No! C V -00-1728

NOTE: Completing this authorization form satisfies your obligation under 28 U.S.C. § 1915(a)(2) to submit a certified copy of your trust fund account.

I, WM Blanch, request and authorize the agency holding me in custody to send to the Clerk of Court, United States District Court for the Middle District of Pennsylvania, a certified copy of the statement for the past six months of my trust fund account (or institutional equivalent) at the institution where I am incarcerated. I further request and authorize the agency holding me in custody to calculate and disburse funds from my trust account (or institutional equivalent) in the amounts specified by 28 U.S.C § 1915(b).

This authorization is furnished in connection with the filing of a civil action, and I understand that the filing fee for the complaint is \$150.00. I also understand that the entire filing fee will be deducted from my account regardless of the outcome of my civil action. This authorization shall apply to any other agency into whose custody I may be transferred.

Date: 5-30-01, 200

Signature of Prisoner

CF3756